A Short Introduction to Psychological First Aid

For Red Cross and Red Crescent Societies
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What is Psychological First Aid (PFA)?

PFA is a set of skills and knowledge that can be used to help people who are in distress. It is a way of helping people to feel calm and able to cope in a difficult situation.

Stress

Stress is a state of pressure or strain that takes place in many different situations. It can be caused by any change – positive or negative. Stress is an ordinary part of everyday life. It is positive when it makes a person perform well, for example, in a test or exam. However, stress can also be negative and lead to distress and crisis.

Distress

This is when someone is unable to cope with or adapt to the challenges or situation they are facing. Distress leads to physical and emotional discomfort and suffering. It can be caused by a one-off crisis event or from stress building up over time.
PFA involves caring about the person in distress, paying attention to their reactions, active listening and giving practical help. It is a way of supporting and connecting someone to the help they need.

PFA skills include knowing:
- how to assess a situation
- about common reactions to crises
- how to approach someone in distress
- how to calm someone who needs it
- how to provide emotional support and practical help.

PFA is...
- comforting someone in distress and helping them feel safe and calm
- assessing needs and concerns
- protecting people from further harm
- providing emotional support
- helping to address immediate basic needs, such as food and water, a blanket or a temporary place to stay
- helping people access information, services and social supports.

PFA is not...
- something only professionals do
- professional counselling or therapy
- encouraging a detailed discussion of the event that has caused the distress
- asking someone to analyze what has happened to them
- pressing someone for details on what happened
- pressuring people to share their feelings and reactions to an event.
Who needs PFA?
PFA can be of help to anyone in distress. However, not everyone who is in distress may need or want PFA. Some people can manage difficult situations on their own or with help from others and may not need your help.

PFA can help people who are going through personal crises, including social or health challenges. It is also an important part of larger scale responses to disasters, conflict and violence and forced migration.

Remember
• people react in different ways and at different times to crises
• not everyone wants or needs PFA
• seeing or hearing something frightening can lead to distress
• some people can manage on their own and do not need help.

When do you provide PFA?
PFA can help at different times after a crisis event. Most people need PFA during or shortly after a crisis. Others may feel distress much later: weeks, months or even years after an event. New challenges or reminders of the crisis, such as anniversaries of the day, may set off memories and lead to distress.

Where do you provide PFA?
You can provide PFA anywhere safe and comfortable for the helper and person(s) in distress. It can be in a home, community centre, shopping centre, school, etc. If possible, choose a place that is quiet and calm.
For sensitive situations, such as if someone has suffered sexual violence, try to find somewhere where other people cannot overhear your conversation. This keeps things confidential and respects the person’s dignity.

**Who can provide PFA?**
Everyone can provide PFA – volunteers, first responders, members of the general public. It is not something only professionals can offer. PFA skills are not difficult to learn. Most people already know and use them without realising they are PFA skills. Examples are active listening, giving help without judgment, calming someone in distress, and dealing with someone’s immediate needs.

**How do you provide PFA?**

**Look, Listen and Link**
The actions you take in PFA depend on the situation and needs of the people you are helping. There are three basic sets of actions – look, listen, and link.
A SHORT INTRODUCTION TO PSYCHOLOGICAL FIRST AID

You may not need to take all of these actions. Sometimes you may need to do an action more than once, or in different orders.
LOOK FOR

- information on what has happened and is happening
- who needs help
- safety and security risks
- physical injuries
- immediate basic and practical needs
- emotional reactions.

CASE

Juan was driving home from work late at night on a dark country road. Suddenly, he noticed the shadow of a cow in the lights of an oncoming car coming towards him. A few seconds later, the car hit the cow.

Juan stopped immediately and thought carefully about the situation and what he should do. His first priority was to stop other accidents from happening. He did this by slowing down the traffic on the other side of the road. He then ran to the car that had landed upside down, while calling for an ambulance.

When Juan reached the car, he saw that the driver had managed to crawl out and was walking away from it. He was almost falling over and seemed dazed. Juan went up to him calmly and said he was there to help. He took his jacket off and put it around the driver. He asked the man if he was injured, or if any part of his body hurt. The driver was holding his arm. He said he thought it might be broken. Juan led him to his own car and asked him to sit in the back seat. He explained that he had called the ambulance and the police and that the man was safe now. He told the man he should try to keep his arm as still as possible until more help arrived. The man sat staring straight ahead, looking completely dazed. He told Juan that he had thought he was going to die when the car flew into the air.

Juan said he would also have been afraid if it had happened to him. He offered him some water and said he would stay with him till more help arrived.
Signs of severe distress that need referral for specialised services:

Sometimes emotional reactions are so strong that they affect the way people live their everyday lives. If this continues for more than a few days, you should refer them to professional mental health support, if available.

Someone needs specialised help if they
- have not been able to sleep for over a week and seem confused
- are so distressed that they are unable to live their lives in the usual way and to care for themselves or their children. For example, they may not be eating well or keeping themselves clean, even if they have food and access to toilets
- lose control and it is difficult to know what they are going to do
- threaten to harm themselves or others
- start abusing drugs and/or alcohol.

People living with a psychological disorder or taking medication before they become distressed may also need continued professional mental health support.
LISTEN refers to how the helper
• approaches someone
• introduces oneself
• pays attention and listens actively
• accepts others’ feelings
• calms the person in distress
• asks about needs and concerns
• helps the person(s) in distress find solutions to their immediate needs and problems.

‘Listen’ is the way the helper communicates with the person(s) in distress from the moment they approach and start to interact with them.

Listening is not only what we do with our ears. That is hearing. Listening is being present, paying attention, and trying to understand what has happened to the person(s) in distress. It is about being aware of what they are feeling and what they need. It is being open, interested, and sensitive to what the distressed person is experiencing. It is also recognizing when someone does not want to talk, and allowing silence.
Calming and active listening

Tom was walking down the street when he heard screaming and commotion coming from one of the shops on the other side of the road. Then he saw a man running out of the shop, with a big bag and a gun in his hand. The man ran to a car, jumped in and sped away.

Tom ran across the road and into the shop. There was a woman behind the counter who was screaming and crying loudly. She seemed to be having a panic attack so Tom said loudly but calmly that she was safe, and that the robber had gone. He told the woman he would call the police and he would stay with her till they came.

The woman started to calm down. She was still having trouble breathing, so Tom found a chair and asked her to sit down. He gently guided her to breathe more calmly. He asked her to quietly feel the air going all the way into her stomach when she took a breath. She reached for his hand and held it tightly. She told him she felt sick and thought she was going to vomit. Tom said he was right there and would stay with her till she felt better.

After a little while, the woman started breathing normally. Tom fetched her a glass of water and quietly asked her how she was feeling. She took the glass and nodded and quietly drank the water. When Tom saw she was calmer, he said he had seen the robber coming out of the shop with a gun. He waited and the woman spoke. She told Tom she had been very afraid. She said she thought she had been about to die.

Tom listened quietly, still holding the woman’s hand. He told her she had been very brave and handled the situation well. He asked her if there was someone he should call to come and be with her, perhaps someone from her family. The woman asked him to call her husband who was out doing some shopping in town. Tom stayed with the woman until her husband arrived and shortly after the police arrived.
Helping someone in distress to feel calmer

It is important to know what to do if someone is in a state of panic or is experiencing physical reactions to a situation of distress. Speak to the person in a calm and unhurried manner and with clear, short sentences. Ask the person to describe their symptoms, and if he or she knows what the symptoms are caused by.

Be aware that chest discomfort and shortness of breath can also be caused by physical problems such as a heart attack or asthma. If there is any doubt as to the cause of the symptoms, make sure the person gets medical help as soon as possible.

Encourage the person to breathe in through the nose, and feel the breath fill up the tummy slowly, and then to breathe out slowly through the mouth. Reassure the person that his or her experience of discomfort will soon stop and that he or she is safe and nothing bad will happen to them. Explain that the symptoms will lessen, as they feel calmer and less distressed.

It is important for the helper to keep calm if someone is panicking, and to understand that it may be difficult for the distressed person to become calm and accept help.
Link actions have practical results. This includes helping the person in distress to get information. This can be through psychoeducation or by connecting them with other people or other services where they can get more information.

**What is psychoeducation?**
Psychoeducation is providing people with information that helps them to better understand their own behaviour and feelings, and those of people around them.

See the IFRC PS Centre’s psycho-education materials for more information. Examples are *What is psycho-education? Coping with acute stress* and *PFA for children*.
Link involves connecting people to loved ones and social support. It is useful for PFA helpers to know what sources of social support are available in an area.

Link actions also include dealing with practical problems and accessing services and other help. This could be, for example, contacting someone to come to be with the distressed person or helping the person with transport home.

**Referring for more specialised help**
Sometimes people in distress have complex reactions or are in complex situations. This means they need more help than you can give with PFA. It is important for PFA helpers to recognize these types of reactions and situations and know how refer for more help. Here are some examples of complex situations and reactions.

**Complex situations**
Complex situations are when the PFA helper cannot provide all the help needed and has to refer and involve others. An easy way to recognize a complex situation is whenever you need to call others for help.

Examples of complex situations are when:

- people have physical injuries that need medical attention
- people have suffered sexual and gender-based violence
- you are helping many people at the same time
- you are helping groups such as children, women or people living with disabilities, as they may have specific needs
- you are helping one or more persons with complex reactions.

**Complex reactions**
Complex reactions are more serious than common reactions to distress. A person with complex reactions often needs referral for specialised help or other assistance.

Refer to back page with template for referral information.
Examples of common complex reactions are:

**Panic attacks and feelings of anxiety** can make someone have a faster heartbeat, shortness of breath, and pain in their chest. They may be sweating more than normal, feel dizzy or light-headed and feel like they want to be sick.

**Anger and aggressive behaviour** are common reactions to crisis in situations of violence, or when people have experienced immense losses.

**Self-harm and suicide.** Self-harm is when a person hurts himself or herself on purpose, for example, by cutting or burning their skin and flesh. Suicide is when someone intentionally takes his or her own life. It is important to always take someone who threatens to harm or kill him or herself seriously and not leave the person alone till more help arrives.

**Prolonged grief** is when someone finds it hard to accept and adapt to the loss of someone they loved. The grief then affects how the person lives from day to day and how they relate to other people. It is not an immediate reaction. It develops over a period of time. It can also lead to extreme feelings of distress when the person experiences new challenges or is somehow reminded of their grief.
**Sleeping problems** are very common after crises. Many people find it difficult to fall asleep. Some people sleep more than usual and find it hard to wake up. If sleeping problems go on for many days and nights, it can lead to physical and psychological problems. Severe sleeping problems interfere with daily living, moods and relationships with other people.

**Flashbacks** are when a person feels as if they are back in the moment of the original stressful event. Flashbacks often feel real and can be confusing and frightening. They are not a sign or mental illness. They are a normal reaction to abnormal experiences. However, the person may still need help to manage them.

**Harmful coping methods** include self-medicating with drugs or alcohol, becoming violent or aggressive, or keeping oneself completely apart from other people.

Certain factors can increase the risk of developing complex reactions.

For example if the person:
- was separated from their family
- thought they were going to die
- was involved in a situation where the horror element was high
- has had previous traumatic experiences
- lost loved ones
- has an underlying psychological disorder.
**PFA for children**

Children face some risks and challenges that are similar to those of adults. But there are also risks that are specific to children. These include losing or becoming separated from parents and caregivers, child abuse and exploitation.

Children do not understand or react to stressful events in the same way adults do. Their reactions vary according to how old they are and how much of the situation they understand. However, there are some general signs in a child’s behaviour that show he or she is in distress.

Examples are if the child:

- has physical symptoms of not feeling well, such as shaking, headaches loss of appetite, aches and pains
- cries a lot and is unable to stop
- is very upset and panicky
- is aggressive and tries to hurt others (hits, kicks, bites, etc.)
- behaves in a way that is unusual
- holds onto their caregivers without letting go
- seems confused and lost
- appears withdrawn or very quiet with little or no movements
- hides or stays away from other people
- does not respond to others, does not speak at all
- is very scared.

PFA for children is also based on the ‘Look, Listen and Link’ actions. However, there are important differences to keep in mind. These are that children’s reactions are different and that the way you communicate with children differs according to their age.
PFA in Groups – Support to teams

Many Red Cross and Red Crescent staff and volunteers work in difficult, complex and sometimes, dangerous environments. They support people through crises and give them practical help, understanding and emotional support. Volunteers and staff may be deeply affected themselves. They see pain and suffering because they are often from the affected communities themselves.

PFA and support meetings are a way of offering support to staff and volunteers during and after crises. This type of meeting gives a space to team members to think deeply about what has happened. These meetings encourage teams to understand more clearly what has happened. They give teams a way of helping one another, for example, through peer support. The meetings also make it possible to identify anyone who needs referral or other individual support.

When do you provide PFA in groups?
PFA in groups can help after a team of staff or volunteers have responded to a crisis together. It can also be offered before a crisis event to prepare team members. Groups can use psycho-education to practise recognizing and coping with symptoms of distress.

Why provide PFA in groups?
PFA in groups is a way of helping many people at the same time. It draws on the strengths and resources of the group members. It encourages everyone to be more connected, using peer support, for example.

How do you provide PFA in groups?
PFA and support meetings for groups use the same PFA actions as for individuals: Look, Listen and Link. The meetings focus on how the group members are relating to one another as well as how individuals are reacting.
Components of a PFA and support meeting

1. Checking how participants are doing
2. A brief factual review of actions taken in the crisis situation
3. Providing information and psycho-education
4. Promoting self-care, peer support and positive coping
5. Linking participants with information for referral as needed
6. Ending the meeting by checking that everyone feels ok and discussing the way forward.
Do no harm
Psychological first aid is calming, emotional support, active listening and practical assistance. It is not counselling or treatment. It focuses on providing emotional and practical support. Helpers do not need detailed personal information about the person they are helping. They do not need to have a full account of the distressing incident.

There are a number of ethical considerations when helping responsibly. This is important when helping individuals or a group of people in distress.

Here is a list of Dos and Don’ts in helping responsibly when providing psychological first aid:
<table>
<thead>
<tr>
<th>DO</th>
<th>DO NOT</th>
</tr>
</thead>
<tbody>
<tr>
<td>respect privacy and keep the person’s story confidential</td>
<td>break the rule of confidentiality, unless you have very good reason to</td>
</tr>
<tr>
<td>give emotional and practical support</td>
<td>probe too deeply</td>
</tr>
<tr>
<td>behave appropriately by considering the person’s culture, age and gender</td>
<td>show disrespect or exploit your relationship as a helper</td>
</tr>
<tr>
<td>listen actively</td>
<td>be distracted and think of other things while someone tells you something important</td>
</tr>
<tr>
<td>be aware of and set aside your own biases and prejudices</td>
<td>judge the person for their actions and feelings</td>
</tr>
<tr>
<td>respect people’s right to make their own decisions and facilitate self-help so they can solve their own problems</td>
<td>tell another person what to do or how to solve their problems</td>
</tr>
<tr>
<td>be honest and trustworthy</td>
<td>make false promises or give false information</td>
</tr>
<tr>
<td>help people access basic needs</td>
<td>ask the person for money or favours for helping them</td>
</tr>
<tr>
<td>know when something is too difficult for you to handle</td>
<td>overestimate your own skills</td>
</tr>
<tr>
<td>make it clear to people that even if they don’t want your help now, they can still access help in the future</td>
<td>continue to press if the person does not want your support</td>
</tr>
<tr>
<td>end your help in a respectful manner.</td>
<td>end the help in an abrupt way, without giving information about further support and closing the conversation.</td>
</tr>
</tbody>
</table>
**Looking after yourself**

Helping responsibly includes helpers taking care of their own health and well-being. Helpers can be affected by supporting others in crisis situations or by their own distress. Providing psychological first aid can be difficult both physically and emotionally. It is not easy interacting with people who are in distress. It can lead to feelings of guilt, sadness, and frustration, if helpers feel they did not do enough.

Helpers can apply the action principles of ‘Look, Listen and Link’ to self-care:

**Look**
- watch your own reactions carefully
- recognize when your reactions are signs or symptoms of high stress or burnout.

**Listen**
- listen to how the reactions are affecting you
- acknowledge and accept your feelings
- try to work out what is affecting your reactions so that you can decide how to manage or cope better.

**Link**
- link with others. Reach out for support from others, either at home or at work
- do activities that can help to protect your well-being.
Personal protective factors
• belonging to a team
• finding work meaningful
• being motivated to help others
• maintaining daily routines and structures
• being able to leave work behind and take a rest
• knowing there is support available, if and when it is needed
• being able to give support to and receive support from team members
• maintaining one’s cultural practices and beliefs
• belonging to a caring family or community.

Organizational protective factors
• regular meetings, which bring all staff and volunteers together and foster a feeling of belonging to a team
• an organizational culture where people can talk openly and share problems and respect the principle of confidentiality
• showing appreciation for the work of volunteers
• reasonable working conditions through policies and strategies
• providing clear information about how to access available support.
Useful referral information
Use this form to write down contact details for referral services that you use in your local area. (Add other services that are not listed.) Keep the list up to date.

<table>
<thead>
<tr>
<th>Referral services</th>
<th>Contact details</th>
</tr>
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<tbody>
<tr>
<td>Emergency services</td>
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<td>Police</td>
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<td>Fire</td>
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<td>Ambulance</td>
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<tr>
<td>Child protection services</td>
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<tr>
<td>Health services</td>
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<tr>
<td>SGBV help and support</td>
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A Short Introduction to Psychological First Aid for Red Cross and Red Crescent Societies

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Psychological First Aid for Red Cross and Red Crescent Societies was developed by the IFRC Reference Centre for Psychosocial Support. It comprises:

- A Guide to Psychological First Aid for Red Cross and Red Crescent Societies
- A Short Introduction to Psychological First Aid for Red Cross and Red Crescent Societies
- Training in Psychological First Aid for Red Cross and Red Crescent Societies:
  - Module 1. An introduction to PFA (4 to 5 hours)
  - Module 2. Basic PFA (8 to 9 hours)
  - Module 3. PFA for Children (8 to 9 hours)
  - Module 4: PFA in Groups – Support to teams (21 hours – three days)

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Psychological first aid is a simple, yet powerful way of helping someone in distress. It involves paying attention to the person’s reactions, active listening and if relevant, practical assistance to help address immediate problems and basic needs. Learning psychological first aid skills and understanding reactions to crises empowers helpers to help others and apply the same skills to their own lives.

Psychological First Aid for Red Cross and Red Crescent Societies has several parts that can be used separately or together. It includes an introductory guide, a short booklet and four training modules. The first two training modules cover basic PFA skills, the third is on PFA for children and the fourth on providing PFA in groups and supporting teams.

We hope these materials will support staff and volunteers in their primary work of helping others. Our goal is to assist National Societies in offering the most effective psychosocial support possible to the people they serve.